Docket No. 5038.1P

## **Declaration For Patent Application**

## **English Language Declaration**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

"Light Emitting Diode Light Source For Curing Dental Composites"

the specification of which

	Composites"		•	•				
	the specification of which							
	(check one)							
153	🔀 is attached hereto.							
- A	□ was filed on		as United States Application No.	or PCT International				
nal han	Application Number							
	and was amended on							
1 1000	(if applicable)							
The first fact from the fi	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.							
	I acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.							
	I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b) of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate or PCT International application having a filing date before that of the application on which priority is claimed.							
	Prior Foreign Application(s	5)		Priority Not Claimed				
	(A)	/O1>	(D. 114 11 24 - Till 11					
	(Number)	(Country)	(Day/Month/Year Filed)					
	(Number)	(Country)	(Day/Month/Year Filed)	J				
	(Number)	(Country)	(Day/Month/Year Filed)					

I hereby claim the benefit under application(s) listed below:	35 U.S.C. Section 119(6	e) of any United States provisional			
60/187899	03/08/00				
(Application Serial No.)	(Filing Date)	•			
(Application Serial No.)	(Filing Date)	-			
(Application Serial No.)	(Filing Date)				
I hereby claim the benefit under 35 U. S. C. Section 120 of any United States application(s Section 365(c) of any PCT International application designating the United States, listed below insofar as the subject matter of each of the claims of this application is not disclosed in the United States or PCT International application in the manner provided by the first paragraph of U.S.C. Section 112, I acknowledge the duty to disclose to the United States Patent and Trader Office all information known to me to be material to patentability as defined in Title 37, Section 1.56 which became available between the filing date of the prior application and the nation of PCT International filing date of this application:					
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)			
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)			
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, abandoned)			

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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Full name of fifth Inventor, if any	3/6/8
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FOR DELITE OF SIXUE WINGHOUT IN SALE	
Sixth inventor's signature	Date
Residence	
Vegine(in•	
Citizenship	
Post Office Address	
POST UNICE Address	
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Full name of seventh inventor, if any	
Seventh inventor's signature	Date
Residence	
Citizenship	
Post Office Address	
Full name of eighth inventor, if	
Eighth inventor's signature	Date
Residence	
Citizenship	
•	<del></del>
Post Office Address	

VERIFIED STATEME STATUS (37 CFR 1.	Docket No. 5038.19.				
Serial No.	Filing Date	Patent No.	Issue Date		
Detentes		TKINATIONAL IN			
Invention: Cight R. Composi	mitting Diode Lig tes	ght Source For	Caring Dental		
I hereby declare that I am:					
☐ - the owner of the sr	mall business concern identifie	d below:			
an official of the sn	nall business concern empowe	red to act on behalf of the conc	ern identified below:		
NAME OF CONCERN:	estler Scientific	International, Inco	-		
ADDRESS OF CONCERN:	9050 South 130	o west, west Jor	don, UTAH 84088		
I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 13 CFR 121.3-18, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year of the concern of the persons employed on a full-time, part-time or temporary basis during each of the pay periods of the fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control the other, or a third party or parties controls or has the power to control both.  I hereby declare that rights under contract or law have been conveyed to and remain with the small business concern identified above with regard to the above identified invention described in:  The specification filed herewith with title as listed above.  The patent identified above.					
organization having rights to person, other than the inve	o the invention is listed on the ntor, who could not qualify as	s concern are not exclusive, of next page and no rights to the an independent inventor under an under 37 CFR 1.9(d) or a sern under 37 CFR 1.9(d)	e invention are held by any er 37 CFR 1.9(c) or by any		

•		-		_	ed, granted, con se any rights in th	•	icensed or am under ar is listed below:	1
			organization ex or organization		ow.			
FULL NAME _ADDRESS _		Individual		Small Busine	ss Concern		Nonprofit Organization	
FULL NAME _								
FULL NAME		Individual		Small Busine	ss Concern		Nonprofit Organization	
ADDRESS _		Individual		Small Busine	ss Concern		Nonprofit Organization	
ADDRESS _		Individual		Small Busine	ss Concern		Nonprofit Organization	
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NAME OF PERSONNEL	SON SIGNI OWNER:	ING	<u>Calvin</u> Vice	Presu	Ostler dent.			_
SIGNATURE:	a	) 	- AA		DATE:	3/7	<u>/o1</u>	